Document

6/08/20	3:37PM

Fill in this inform	nation to identify your case:
Debtor 1	Michele A. Henderson-Williams
Debtor 2 (Spouse, if filing)	
United States B	Bankruptcy Court for the: Northern District of Illinois
Case number (if known)	

Check one box only	as directed	in this	form	and in	Form
122A-1Supp:					

- 1. There is no presumption of abuse
- 2. The calculation to determine if a presumption of abuse applies will be made under Chapter 7 Means Test Calculation (Official Form 122A-2).

Column B

Debtor 2 or

- 3. The Means Test does not apply now because of qualified military service but it could apply later.
- ☐ Check if this is an amended filing

## Official Form 122A - 1

## **Chapter 7 Statement of Your Current Monthly Income**

04/20

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file Statement of Exemption from Presumption of Abuse Under § 707(b)(2) (Official Form 122A-1Supp) with this form.

## Part 1: **Calculate Your Current Monthly Income**

- 1. What is your marital and filing status? Check one only.
  - □ Not married. Fill out Column A, lines 2-11.
  - ☐ Married and your spouse is filing with you. Fill out both Columns A and B, lines 2-11.
  - Married and your spouse is NOT filing with you. You and your spouse are:
    - Living in the same household and are not legally separated. Fill out both Columns A and B, lines 2-11.
    - Living separately or are legally separated. Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C § 707(b)(7)(B).

Column A

**Debtor 1** 

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

					non-fili	ng spouse
<ol><li>Your gross wages, se payroll deductions).</li></ol>	alary, tips, bonuses, overtime,	and commission	ons (before all	\$ 5,027.00	\$	0.00
<ol> <li>Alimony and mainter Column B is filled in.</li> </ol>	nance payments. Do not include	payments from		\$ 0.00	\$	0.00
of you or your depen from an unmarried par and roommates. Include	y source which are regularly pa dents, including child support. tner, members of your household de regular contributions from a sp e payments you listed on line 3.	. Include regular I, your depende	contributions nts, parents, lumn B is not	\$ 0.00	\$	0.00
5. Net income from ope	rating a business, profession,	or farm				
		Deb	otor 1			
Gross receipts (before	all deductions)	\$ 0.00				
Ordinary and necessa	ry operating expenses	-\$ 0.00				
•	om a business, profession, or far	m \$ 0.00	Copy here ->	\$ 0.00	\$	0.00
6. Net income from ren	tal and other real property	·				
		Deb	otor 1			
Gross receipts (before	all deductions)	\$ 0.00				
Ordinary and necessa	,	-\$ 0.00				
•	om rental or other real property	\$ 0.00	Copy here -> :	\$ 0.00	\$	0.00
7. Interest, dividends, a	,			\$ 0.00	\$	0.00

	wiicheie	A. Henderson-William								
						Column A Debtor 1		Columi Debtor non-fil		
Un	employme	nt compensation				\$	0.00	\$	0.00	_
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					0.00					
		ouse			0.00					
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Do und cor crir cor Go dea	not include der the Fed der the Nati ronavirus di me, a crime mpensation overnment ir ath of a mei	all other sources not listed any benefits received under any benefits received under all law relating to the national Emergencies Act (50 sease 2019 (COVID-19); pagainst humanity, or interpension, pay, annuity, or no connection with a disabilismber of the uniformed serve and put the total below	der the Social Sonal emergence U.S.C. 1601 eigenments receinational or domallowance paicty, combat-rela	Security Act; payme by declared by the F t seq.) with respect ved as a victim of a nestic terrorism; or If by the United Stat ated injury or disabi	ents made President to the a war tes lity, or					
						\$	0.00	\$	0.00	_
						\$	0.00	\$	0.00	_
	Total	amounts from separate pa	ages if any			Φ.		•		
1 Cal	Iculate vou			nes 2 through 10 fo	<b>+</b>	\$	0.00		0.00	-
ead	ch column.	Ir total current monthly in Then add the total for Colu	ncome. Add lin Imn A to the tot	tal for Column B.	r	5,027.00	<b>0.00</b> + \$	0.0	<u>o</u>	5,027.00
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Entered 06/08/20 15:42:32 Desc Main Filed 06/08/20 Case 20-12105 Doc 2

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Michele A. Henderson-Williams Case number (if known) Debtor 1 Signature of Debtor 1 Date June 8, 2020 MM / DD / YYYY

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.